



YMCA Camp Sloper Outdoor Center

Southington-Cheshire Community YMCAs



Outdoor Center Membership Form

First Name _____ Last Name: _____

Address _____

Town _____ State: _____ Zip _____

Home Phone #: _____ Email: _____

Name of Employer: _____ Work Phone #: _____

Vehicle Make: _____ Vehicle Model: _____ Plate #: _____

Would you be interested in hearing more about any of the following volunteer opportunities at YMCA Camp Sloper? Please circle yes or no for all:

Outdoor Center Committee Yes - No
(Meets every other month, Sept. – May)

Saturday Morning Work Group Yes – No
(Meets twice a month for workdays)

Sloper Sub-committees:
(All sub-committees meet three times a year)

Building and Property Yes - No

Membership and Volunteer Dev. Yes - No

Pond Management Yes - No

Sloper Alumni Yes - No

Woodland Management Yes – No

Membership Card #: _____

I have read and understand the YMCA Camp Sloper rules and regulations stated on the reverse side of this form. I understand that my Outdoor Center membership may be revoked for any infractions to the stated rules and regulations. I understand that my membership will expire on December 31 of this year.

Name: _____ Signature: _____ Date: _____